REFERENCE TITLE: insurance score; credit history

State of Arizona House of Representatives Forty-eighth Legislature First Regular Session 2007

HB 2509

Introduced by Representative Murphy

AN ACT

AMENDING SECTION 20-2110, ARIZONA REVISED STATUTES; AMENDING TITLE 20, CHAPTER 11, ARTICLE 1, ARIZONA REVISED STATUTES, BY ADDING SECTION 20-2110.01; RELATING TO PROPERTY OR CASUALTY INSURANCE.

(TEXT OF BILL BEGINS ON NEXT PAGE)

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Be it enacted by the Legislature of the State of Arizona: Section 1. Section 20-2110, Arizona Revised Statutes, is amended to read:

20-2110. Reasons for adverse underwriting decisions

- A. In the event of an adverse underwriting decision the insurance institution or insurance producer responsible for the decision shall either provide the applicant, policyholder or individual proposed for coverage with the specific reason for the adverse underwriting decision in writing or advise the person, in writing, that upon written request the person may receive the specific reason in writing and provide the applicant, policyholder or individual proposed for coverage with a summary of the rights established under subsection B of this section and sections 20-2108 and 20-2109.
- B. Upon receipt of a written request within ninety business days from the date of the mailing of notice or other communication of an adverse underwriting decision to an applicant, policyholder or individual proposed for coverage, The insurance institution or insurance producer shall furnish to the person APPLICANT, POLICYHOLDER OR INDIVIDUAL PROPOSED FOR COVERAGE within twenty-one business days from the date of receipt of the written request THE ADVERSE UNDERWRITING DECISION:
- 1. The specific reason for the adverse underwriting decision, in writing, if the information was not initially furnished in writing pursuant to subsection A of this section.
- 2. The specific items of personal and privileged information that support those reasons. except that:
- (a) The insurance institution or insurance producer is not required to furnish specific items of privileged information EVEN if it has a reasonable suspicion, based upon specific information available for review by the director, that the applicant, policyholder or individual proposed for coverage has engaged in criminal activity, fraud, material misrepresentation or material nondisclosure.
- (b) Specific items of medical record information supplied by a medical care institution or medical professional shall be disclosed either directly to the individual about whom the information relates or to a medical professional designated by the individual and licensed to provide medical care with respect to the condition to which the information relates, at the option of the insurance institution or insurance producer.
- 3. The names and addresses of the institutional sources that supplied the specific items of information pursuant to paragraph 2 of this subsection, except that the identity of any medical professional or medical care institution shall be disclosed either directly to the individual or to the designated medical professional, whichever the insurance institution or insurance producer prefers.

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- C. The obligations imposed by this section upon an insurance institution or insurance producer may be satisfied by another insurance institution or insurance producer authorized to act on its behalf.
- D. If an adverse underwriting decision results solely from an oral request or inquiry, the explanation of the specific reasons and summary of rights required by subsection A of this section may be given orally.
- E. In providing the specific reason for an adverse underwriting decision based on credit related information contained or not contained in an individual's consumer report, the insurance institution or agent shall provide at least the following information:
- 1. That the decision was based in part on a consumer report or the absence of credit history.
- 2. The source of the consumer report and how the individual may obtain a copy of the consumer report. THE INSURANCE INSTITUTION OR INSURANCE PRODUCER SHALL PROVIDE THE CONSUMER REPORT AT NO COST TO THE APPLICANT, POLICYHOLDER OR INDIVIDUAL.
- 3. A description of up to four ALL factors that were the primary cause for the adverse action that resulted from the insurance score.
- 4. IF FACTORS OTHER THAN THE CREDIT HISTORY WERE USED IN THE DECISION, A DESCRIPTION OF THESE FACTORS THAT WERE THE CAUSE FOR THE ADVERSE ACTION.
- F. An insurer shall not use the following types of credit history to calculate an insurance score to determine property or casualty premiums for insurance transactions that are subject to this article and shall not knowingly use an insurance score developed by a third party if the score is calculated using any of the following types of credit history:
- 1. The absence of credit history or the inability to determine the consumer's credit history unless the insurer's action is actuarially justified or the insurer treats the consumer as if the consumer had neutral credit information, as defined by the insurer.
- 2. Credit history or an insurance score based on collection accounts identified with a medical industry code.
- 3. A bankruptcy or a lien satisfaction that is more than seven FIVE years old.
- 4. The consumer's use of a particular type of credit card, charge card or debit card unless actuarially justified.
- 5. The consumer's total available line of credit, except that an insurer may consider the total amount of outstanding debt in relation to the total available line of credit.
- 6. An insurance score that is calculated using the income, gender, address, zip code, ethnic group, religion, marital status or nationality of the consumer as a factor. This section PARAGRAPH does not prohibit an insurer from using zip code, address, gender and marital status information for underwriting purposes.
- 7. THE NUMBER OF CREDIT INQUIRIES MADE BY THE CONSUMER DURING THE PREVIOUS TWENTY-FOUR MONTHS.

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- 8. FACTORS RELATING TO AN APPLICANT'S EMPLOYMENT STATUS THAT MAY AFFECT THE APPLICANT'S INCOME, INCLUDING THE APPLICANT'S OCCUPATION, WHETHER THE APPLICANT IS SELF-EMPLOYED OR THE APPLICANT'S DISABILITY STATUS.
- G. IF AN INSURER USES A THIRD PARTY TO CALCULATE AN INSURANCE SCORE TO DETERMINE PROPERTY OR CASUALTY PREMIUMS FOR INSURANCE TRANSACTIONS, THE THIRD PARTY SHALL HAVE ITS FORMULA FOR ARRIVING AT AN INSURANCE SCORE ON FILE WITH THE DIRECTOR
- H. IN CALCULATING THE INSURANCE SCORE TO DETERMINE PROPERTY OR CASUALTY PREMIUMS FOR INSURANCE TRANSACTIONS THAT ARE SUBJECT TO THIS ARTICLE, AN INSURER SHALL NOT USE A SURCHARGE OR DISCOUNT THAT IS USED IN RELATION TO A PRIOR CLAIM HISTORY FOR THE NONCREDIT SCORE PORTION OF A POLICY RATING TO DETERMINE THE SURCHARGE OR DISCOUNT IN RELATION TO THE INSURANCE SCORE.
- Sec. 2. Title 20, chapter 11, article 1, Arizona Revised Statutes, is amended by adding section 20-2110.01, to read:

20-2110.01. <u>Property or casualty insurance; offer of best rate</u> available regardless of credit history

- A. IN THE CASE OF PROPERTY OR CASUALTY INSURANCE, AN INSURER SHALL OFFER TO AN INDIVIDUAL THE BEST RATE AVAILABLE THAT THE INSURER OFFERS IN THAT AREA BASED ON THE INSURANCE SCORE THAT IS CALCULATED ASSUMING THE INDIVIDUAL HAS THE BEST CREDIT HISTORY THAT IS USED TO CALCULATE THAT INSURER'S INSURANCE SCORE ON AN INDIVIDUAL.
- B. THE RATE OFFERED TO AN INDIVIDUAL PURSUANT TO SUBSECTION A IS VALID ONLY FOR THE DURATION OF THE FIRST POLICY TERM. THEREAFTER, THE INSURER MAY OFFER PROPERTY OR CASUALTY INSURANCE TO THE INDIVIDUAL BASED ON THE INSURER'S NORMAL BUSINESS PRACTICES.

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